

AUG 24 2005

**FACSIMILE TRANSMITTAL SHEET AND
CERTIFICATE OF TRANSMISSION UNDER 37 CFR 1.8**

The documents accompanying this telecopy transmission contain confidential information belonging to the sender which is legally protected. The information is intended only for the use of the individual or entity named above. If you are not the intended recipient, you are hereby notified that any disclosure, copying, distribution or the taking of any action in reliance on the contents of this telecopied information is strictly prohibited. If you have received this telecopy in error, please immediately notify us by telephone (collect) to arrange for return of the telecopied documents to us.

TO: U.S. Patent Office
Central Facsimile
Processing Facility

FROM: Daniel F. Nesbitt
Hasse & Nesbitt LLC

PHONE: (703) 308-1202

PHONE: (513) 229-0383

FAX: (571) 273-8300

FAX: (513) 229-0683

I, Elaine Willig, hereby certify that the below identified
correspondence is being facsimile transmitted to the United
States Patent and Trademark Office on August 24, 2005.

Signature: Elaine Willig

Pages being transmitted:

Total No. of Pages including this cover letter: 2

1. Power of Attorney & Corresp. Address
Change (1 page)

Application No.: 10/724,532

Filed: November 29, 2003

Inventor: Reed et al.

Attorney Docket No.:

COMMENTS:

PTO/SB/81 (04-05)

Approved for use through 11/30/2006. OMB 0681-0035
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**POWER OF ATTORNEY
and
CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number	10/724,532
Filing Date	November 29, 2003
First Named Inventor	Thomas D. REED et al.
Title	Signal for Targeting Molecules...
Art Unit	1853
Examiner Name	CARLSON, Karen C.
Attorney Docket Number	

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

☒ Practitioners associated with the Customer Number:

26888

26868

OR

☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

☒ The address associated with the above-mentioned Customer Number:

OR

☐ The address associated with Customer Number:

OR

☐ Firm or Individual Name

Address

City

State

Zip

Country

Telephone

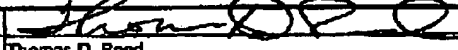
Email

I am the:

☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/06)

SIGNATURE of Applicant or Assignee of Record

Signature		Date	8/24/05
Name	Thomas D. Reed	Telephone	540-345-4333
Title and Company	CHAIRMAN AND CHIEF SCIENCE OFFICER INTELEXON - GENOMITIX		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ *Total of _____ forms are submitted.

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 36 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

BEST AVAILABLE COPY